

**UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON
AT SEATTLE**

STATE OF WASHINGTON, et al.,

Plaintiffs,

v.

DONALD J. TRUMP, in his official
capacity as President of the United States of
America, et al.,

Defendants.

NO.

DECLARATION OF A.M.M.

DECLARATION OF A.M.M.

ATTORNEY GENERAL OF WASHINGTON
Complex Litigation Division
800 Fifth Avenue, Suite 2000
Seattle, WA 98104
(206) 464-7744

1 I, A.M.M., declare as follows:

2 1. I am over the age of 18, competent to testify as to the matters herein, and make
3 this declaration based on my personal knowledge.

4 2. I am the parent of Minor A.M. I live in Lynnwood, Washington with my wife and
5 child. My wife has also provided a declaration in this action and is identified therein as A.M.

6 3. My child is non-binary and uses they/them pronouns. I have chosen to refer to
7 them in this declaration as "Minor A.M." because I am afraid for them and our family's safety
8 and privacy in the current political climate. That is why I am also choosing to refer to myself by
9 my initials.

10 4. Minor A.M. is a very active and inquisitive six-year-old. They like school, have
11 many friends and have a wide range of interests. They love history, learning about the military,
12 playing with Legos, creating gifts to give to friends and family, and Star Wars. They are also
13 autistic and have a 504 plan at school.

14 5. I am a licensed therapist and independent clinical social worker (LICSW)
15 licensed by the Washington State Department of Health. I earned a Master's degree in
16 Social Work from the New York University (NYU) in 2013. My coursework at NYU focused
17 on social justice with an emphasis on BIPOC and LGBTQ+ communities.

18 6. After moving back to Washington I went to work for SeaMar from 2016 to 2017.
19 In my last year at SeaMar, I provided mental health services exclusively. It was during this time
20 that I started seeing transgender teenagers and adults.

21 7. In 2018 and 2019 I worked as a mental health therapist at Seattle Counseling
22 Service, which served adults within the LGBTQ+ community. I worked with many people who
23 I identified as transgender and nonbinary. I heard many stories of adults who wished they had
24 the opportunity to have access to gender-affirming care in childhood. I also provided gender-
25 affirming care letters for clients so their insurance would cover gender-affirming care services.
26

1 8. Over the last five years, in my private practice, I have provided a wide range of
2 mental health services. Currently, the majority of my clients are LGBTQ+ and BIPOC clients.
3 In my current practice I provide individual counseling for youth ages 16 and up, as well as
4 therapy for adults and parent support for parents of transgender or gender expansive youth.

5 9. As part of the care I provide, I will do assessments for gender-affirming care, and
6 if appropriate, provide the appropriate letter identifying gender dysphoria and the need for more
7 services, which they determine with their medical provider, parents, and caregivers.

8 10. The youth who come to see me have a sense of who they are and are seeking more
9 support around their internal struggle to accept who they are, while navigating safe and authentic
10 ways to express themselves. Some youths have chosen to receive gender-affirming care such as
11 hormone replacement therapy, while others have chosen not to. Some feel more comfortable
12 passing as their chosen gender or presenting in a more ambiguous way. I view my role as being
13 able to provide my clients with a safe space, guidance, and knowledge along their journey of
14 gender affirmance. Particularly for kids, I believe in being open and honest, asking questions,
15 and making sure that they have enough information to make the right decisions.

16 11. Once my clients start getting the gender-affirming care they need, I have seen
17 significant positive functional impacts. Many will go from socially isolating themselves,
18 engaging in negative internal dialogue, not going to school and “not liking people,” to going
19 back to school, joining a club, and seeking out community. I have also seen in my practice
20 varying levels of depression and anxiety among my transgender clients. When young people are
21 first exploring gender, it can be very confusing and hard for them to imagine the future and where
22 they fit into it. After getting the care they need, it becomes easier for them to do that and to more
23 fully participate in their lives, families, and communities. This has also been my experience as a
24 parent of a non-binary child.

25 12. My wife and I are supportive of our child’s identity. When they told us they were
26 a girl, we talked about gender constantly. When Minor A.M. was in kindergarten, they told us

1 that they were actually non-binary and wanted to use they/them pronouns. They were very
2 insistent and confident in these feelings. They have shown increased self-confidence since
3 sharing their gender identity with us when they were in preschool.

4 13. As a practitioner and a parent, I understand that mental health support is an
5 important part of gender-affirming care, especially for people Minor A.M.'s age; not because of
6 their gender identity, but because of the daily anxiety and stress they experience when they are
7 misgendered by an adult at school. It took a while, but we were able to find a mental health
8 provider with skills in gender identity. Minor A.M. started getting mental health care at
9 five years old. Once the therapy started and Minor A.M. had a supportive teacher, we noticed
10 that they were a happier and more content child. It is very important to Minor A.M. that adults
11 see them accurately as a non-binary person. When kids mis-gender them, they do not have as
12 strong of a reaction and are able to correct them. When adults do not see them accurately it
13 causes Minor A.M. significant distress. Minor A.M. has shared that when they are misgendered
14 it makes their heart and stomach hurt.

15 14. At six years old I understand that my child is years out from any medical
16 interventions, such as hormone blockers. However, if they do not have access to the care they
17 need, when they need it, it will be detrimental to them and our family. Hormone blockers could
18 give increased autonomy for our child to have added years to make decisions about their body
19 and how they want their gender to be presented on the outside. Hormone blockers have the
20 potential to also provide decreased symptoms of anxiety for our child because they will not go
21 through puberty until they choose how they want to present their gender on the outside. When
22 and if the time comes, it is very important to us to live in a place where we have access to all
23 options. This is not a linear process, and we do not know how the journey will go or where
24 Minor A.M. will end up on it. Lack of access to the appropriate care can also have a significant
25 detrimental impact on trans and gender expansive people's safety as they navigate their world.
26

1 15. An important part of gender-affirming care is that the person gets to live
2 authentically as themselves, everywhere they are. Minor A.M. is very insistent on this. It is very
3 obvious and distressing to them when that is not the case.

4 16. None of this is fast. This is a very slow, deliberate process. The narrative that
5 these decisions are made quickly without careful consideration or consultation with mental and
6 physical health providers, or that surgeries are being performed in schools, is absolutely false.

7 17. Concerning the recent Executive Order (EO) restricting gender-affirming care for
8 transgender youth, it is upsetting, and I am terrified to think about the possibility of having to
9 tell our child that they can't have gender-affirming care. My fears for our child, and for
10 transgender and gender expansive youth across Washington if this EO isn't stopped, is for their
11 mental and physical health. These young people already face significant challenges and stressors
12 navigating their world. Many of them have already experienced the trauma associated with being
13 LGBTQ+ and/or BIPOC. It is not an exaggeration to say that this EO feels like a targeted attack.
14 I expect the number of my clients who experience PTSD to increase. For clients whose
15 treatments may be interrupted, they will be exposed to more violence as their outward
16 appearance changes and they no longer "pass." People are going to die by suicide or as victims
17 of hate crimes.

18 18. As a provider, I am hearing concern about how insurance for gender-affirming
19 care may be affected, as well as the impact on Medicare and Medicaid. If these healthcare
20 supports are impacted negatively, clients and families like mine will have less access to the care
21 they need and that will be dangerous.

22 19. If we could not find gender-affirming care for our child in the United States, we
23 would have to consider moving to another country in order for them to get the care they need.
24 Washington is our home. Both my wife and I have aging parents who live here and that we help
25 take care of, we have careers and communities that we are part of and that mean a great deal to
26 us. We do not otherwise want to leave the United States. We also do not have the resources to

1 sue the Federal Government ourselves. Not only would that put us at financial risk, but it would
2 also put our family's safety at extreme peril.

3 I declare under penalty of perjury under the laws of the State of Washington and the
4 United States of America that the foregoing is true and correct.

5 DATED and SIGNED this ____ day of February 2025, at _____, Washington.

6
7 _____
8 A.M.M.
9 Parent of Minor A.M.
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26

1 sue the Federal Government ourselves. Not only would that put us at financial risk, but it would
2 also put our family's safety at extreme peril.

3 I declare under penalty of perjury under the laws of the State of Washington and the
4 United States of America that the foregoing is true and correct.

5 DATED and SIGNED this 4 day of February 2025, at Lynnwood, Washington.

6
7 A. M. M.

8 A.M.M.

9 Parent of Minor A.M.
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26

DECLARATION OF A.M.M.